MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO. 10/588083 FILING DATE

(FOR USE WITH FORM PTO-875)

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1"AMENDMENT		AFTER 2 MAMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1			
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TOTAL CLAIMS	0		18	* 1. J. C. T.	0	

PTO - 1360 (REV. 04/2007)

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	AS FILED		AFTER 1"AMENDMENT		AFTER 2 ** AMENDMENT	
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TOTAL IND.	0 .	•	0	1	0	•
TOTAL DEP.	0	(0	←	0	←
TOTAL CLAIMS	0		0		0	- American Control
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